



Embryo Transfer and Natural Calf Registration Application

ET CALVES MUST BE PARENT VERIFIED THROUGH DNA TESTING TO QUALIFY FOR REGISTRATION

6 Inverness Court East, Suite 260
Englewood, Co 80112 -5595
Phone : 303-220-1693 Fax: 303-220-1884

Member #:

Herd Prefix:

Natural Calf Sire/Dam Data	Dam Tattoo		Dam Registration #		Dam Tag	Dam Status	Sire Registration #		A.I. <input type="checkbox"/>	A.I. Date:		Calf will be registered unless box below is checked	
	Donor Dam Tattoo		Donor Dam Registration #		Sire Registration #		Fresh Embryo <input type="checkbox"/>	Frozen Embryo <input type="checkbox"/>		Date of Flush			
Embryo Transplant Data	Recipient Cow Tattoo/ID		Recip Registration #		Recip Birth Year		Recip Breed Codes		Date of Transplant			DO NOT REGISTER <input type="checkbox"/>	
	Calf Tattoo (Herd Prefix, ID, Year Code)		Calf Tag		Birthdate	Birth Grp	Sex	Type	H/P/S	Color	Birth Wt		Ease
Calf Data	Calf Name (25 letters and spaces)												
	Wean Data	Weaning Date	Grp	Creep <input type="checkbox"/>	Weaning Weight	Hip Ht	Disp.	Dam Wt	Dam BCS				
Transfer To:	Member #		Name			Address				Date of Sale		Mail To:	
												Buyer <input type="checkbox"/>	Seller <input type="checkbox"/>

Natural Calf Sire/Dam Data	Dam Tattoo		Dam Registration #		Dam Tag	Dam Status	Sire Registration #		A.I. <input type="checkbox"/>	A.I. Date:		Calf will be registered unless box below is checked	
	Donor Dam Tattoo		Donor Dam Registration #		Sire Registration #		Fresh Embryo <input type="checkbox"/>	Frozen Embryo <input type="checkbox"/>		Date of Flush			
Embryo Transplant Data	Recipient Cow Tattoo/ID		Recip Registration #		Recip Birth Year		Recip Breed Codes		Date of Transplant			DO NOT REGISTER <input type="checkbox"/>	
	Calf Tattoo (Herd Prefix, ID, Year Code)		Calf Tag		Birthdate	Birth Grp	Sex	Type	H/P/S	Color	Birth Wt		Ease
Calf Data	Calf Name (25 letters and spaces)												
	Wean Data	Weaning Date	Grp	Creep <input type="checkbox"/>	Weaning Weight	Hip Ht	Disp.	Dam Wt	Dam BCS				
Transfer To:	Member #		Name			Address				Date of Sale		Mail To:	
												Buyer <input type="checkbox"/>	Seller <input type="checkbox"/>

Natural Calf Sire/Dam Data	Dam Tattoo		Dam Registration #		Dam Tag	Dam Status	Sire Registration #		A.I. <input type="checkbox"/>	A.I. Date:		Calf will be registered unless box below is checked	
	Donor Dam Tattoo		Donor Dam Registration #		Sire Registration #		Fresh Embryo <input type="checkbox"/>	Frozen Embryo <input type="checkbox"/>		Date of Flush			
Embryo Transplant Data	Recipient Cow Tattoo/ID		Recip Registration #		Recip Birth Year		Recip Breed Codes		Date of Transplant			DO NOT REGISTER <input type="checkbox"/>	
	Calf Tattoo (Herd Prefix, ID, Year Code)		Calf Tag		Birthdate	Birth Grp	Sex	Type	H/P/S	Color	Birth Wt		Ease
Calf Data	Calf Name (25 letters and spaces)												
	Wean Data	Weaning Date	Grp	Creep <input type="checkbox"/>	Weaning Weight	Hip Ht	Disp.	Dam Wt	Dam BCS				
Transfer To:	Member #		Name			Address				Date of Sale		Mail To:	
												Buyer <input type="checkbox"/>	Seller <input type="checkbox"/>

I hereby certify and declare that the above is true and correct, and I desire to have the same recorded in the North American Limousin Foundation record, in consideration of which I agree to and be bound by the by-laws, rules, and regulations of the Foundation and amendments thereto: Applicant Signature: _____ Date: _____